

**EXHIBIT 1**

**UCC FINANCING STATEMENT**

## FOLLOW INSTRUCTIONS

<b>A. NAME &amp; PHONE OF CONTACT AT FILER(Optional)</b> Corporation Service Company-(800) 858-5294	
<b>B. E-MAIL CONTACT AT FILER(optional)</b> filingdept@cscinfo.com	
<b>C. SEND ACKNOWLEDGMENT TO: (Name and Address)</b> <div style="border: 1px solid black; padding: 10px; margin: 10px 0;">           Corporation Service Company            COUNTER            Springfield            IL 62703            United States         </div>	
<b>THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY</b>	

1. DEBTOR'S NAME: Provide the exact, full Debtor name. Do not omit, modify or abbreviate any part of Debtor's name.

1a. ORGANIZATION'S NAME MIDNIGHT MADNESS DISTILLING LLC				
OR 1b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX	
1c. MAILING ADDRESS 118 NORTH MAIN STREET	CITY TRUMBAUERSVILLE	STATE PA	POSTAL CODE 18970	COUNTRY USA

2. DEBTOR'S NAME: Provide the exact, full Debtor name. Do not omit, modify, or abbreviate any part of the Debtor's name.

2a. ORGANIZATION'S NAME				
OR 2b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX	
2c. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY

3. SECURED PARTY'S NAME (or NAME of ASSIGNEE of ASSIGNOR SECURED PARTY): Provide only one Secured Party name (3a or 3b)

3a. ORGANIZATION'S NAME PNC Bank, National Association				
OR 3b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX	
3c. MAILING ADDRESS 500 First Avenue	CITY Pittsburgh	STATE PA	POSTAL CODE 15219	COUNTRY USA

4. COLLATERAL: This financing statement covers the following collateral:

The Collateral includes all assets of the Grantor, of every kind and nature, now existing and hereafter acquired and arising and wherever located, including without limitation, accounts (including health-care-insurance receivables and credit card receivables), deposit accounts, commercial tort claims, letter of credit rights, chattel paper (including electronic chattel paper), documents, instruments, investment property, general intangibles (including payment intangibles), software, goods, inventory, equipment, furniture and fixtures, all supporting obligations of the foregoing, and all cash and noncash proceeds and products (including without limitation insurance proceeds) of the foregoing, and all additions and accessions thereto, substitutions therefor and replacements thereof.

5. Check only if applicable and check only one box. Collateral is <input type="checkbox"/> held in a Trust (see UCC1Ad, item 17 and Instructions) <input type="checkbox"/> being administered by a Decedent's Personal Representative	
6a. Check only if applicable and check only one box: <input type="checkbox"/> Public-Finance Transaction <input type="checkbox"/> Manufactured-Home Transaction <input type="checkbox"/> A Debtor is a Transmitting Utility	6b. Check only if applicable and check only one box: <input type="checkbox"/> Agricultural Lien <input type="checkbox"/> Non-UCC Filing
7. ALTERNATIVE DESIGNATION (if applicable): <input type="checkbox"/> Lessee/Lessor <input type="checkbox"/> Consignee/Consignor <input type="checkbox"/> Seller/Buyer <input type="checkbox"/> Bailee/Bailor <input type="checkbox"/> Licensee/Licensor	

8. OPTIONAL FILER REFERENCE DATA:

ACBS :JH [164510586]

International Association of Commercial Administrators(IACA)

**UCC FINANCING STATEMENT**

## FOLLOW INSTRUCTIONS

<b>A. NAME &amp; PHONE OF CONTACT AT FILER(Optional)</b> Corporation Service Company-(800) 858-5294	
<b>B. E-MAIL CONTACT AT FILER(optional)</b> filingdept@cscinfo.com	
<b>C. SEND ACKNOWLEDGMENT TO: (Name and Address)</b> <div style="border: 1px solid black; padding: 10px; margin: 10px 0;">           Corporation Service Company            COUNTER            Springfield            IL 62703            United States         </div>	
<b>THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY</b>	

1. DEBTOR'S NAME: Provide the exact, full Debtor name. Do not omit, modify or abbreviate any part of Debtor's name.

1a. ORGANIZATION'S NAME MIDNIGHT MADNESS DISTILLING LLC				
OR 1b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX	
1c. MAILING ADDRESS 118 NORTH MAIN STREET	CITY TRUMBAUERSVILLE	STATE PA	POSTAL CODE 18970	COUNTRY USA

2. DEBTOR'S NAME: Provide the exact, full Debtor name. Do not omit, modify, or abbreviate any part of the Debtor's name.

2a. ORGANIZATION'S NAME				
OR 2b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX	
2c. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY

3. SECURED PARTY'S NAME (or NAME of ASSIGNEE of ASSIGNOR SECURED PARTY): Provide only one Secured Party name (3a or 3b)

3a. ORGANIZATION'S NAME PNC Bank, National Association				
OR 3b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX	
3c. MAILING ADDRESS 500 First Avenue	CITY Pittsburgh	STATE PA	POSTAL CODE 15219	COUNTRY USA

4. COLLATERAL: This financing statement covers the following collateral:

The Collateral includes all assets of the Grantor, of every kind and nature, now existing and hereafter acquired and arising and wherever located, including without limitation, accounts (including health-care-insurance receivables and credit card receivables), deposit accounts, commercial tort claims, letter of credit rights, chattel paper (including electronic chattel paper), documents, instruments, investment property, general intangibles (including payment intangibles), software, goods, inventory, equipment, furniture and fixtures, all supporting obligations of the foregoing, and all cash and noncash proceeds and products (including without limitation insurance proceeds) of the foregoing, and all additions and accessions thereto, substitutions therefor and replacements thereof.

5. Check only if applicable and check only one box. Collateral is <input type="checkbox"/> held in a Trust (see UCC1Ad, item 17 and Instructions) <input type="checkbox"/> being administered by a Decedent's Personal Representative	
6a. Check only if applicable and check only one box: <input type="checkbox"/> Public-Finance Transaction <input type="checkbox"/> Manufactured-Home Transaction <input type="checkbox"/> A Debtor is a Transmitting Utility	6b. Check only if applicable and check only one box: <input type="checkbox"/> Agricultural Lien <input type="checkbox"/> Non-UCC Filing
7. ALTERNATIVE DESIGNATION (if applicable): <input type="checkbox"/> Lessee/Lessor <input type="checkbox"/> Consignee/Consignor <input type="checkbox"/> Seller/Buyer <input type="checkbox"/> Bailee/Bailor <input type="checkbox"/> Licensee/Licensor	

8. OPTIONAL FILER REFERENCE DATA:

ACBS :TF [168700914]

International Association of Commercial Administrators(IACA)

**UCC FINANCING STATEMENT**

## FOLLOW INSTRUCTIONS

<b>A. NAME &amp; PHONE OF CONTACT AT FILER(Optional)</b> Corporation Service Company-(800) 858-5294	
<b>B. E-MAIL CONTACT AT FILER(optional)</b> filingdept@cscinfo.com	
<b>C. SEND ACKNOWLEDGMENT TO: (Name and Address)</b> <div style="border: 1px solid black; padding: 10px; margin: 10px 0;">           Corporation Service Company            COUNTER            Springfield            IL 62703            United States         </div>	
<b>THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY</b>	

1. DEBTOR'S NAME: Provide the exact, full Debtor name. Do not omit, modify or abbreviate any part of Debtor's name.

1a. ORGANIZATION'S NAME Midnight Madness Distilling LLC				
OR 1b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX	
1c. MAILING ADDRESS 118 North Main Street	CITY Trumbauersville	STATE PA	POSTAL CODE 18970	COUNTRY USA

2. DEBTOR'S NAME: Provide the exact, full Debtor name. Do not omit, modify, or abbreviate any part of the Debtor's name.

2a. ORGANIZATION'S NAME				
OR 2b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX	
2c. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY

3. SECURED PARTY'S NAME (or NAME of ASSIGNEE of ASSIGNOR SECURED PARTY): Provide only one Secured Party name (3a or 3b)

3a. ORGANIZATION'S NAME PNC Equipment Finance, LLC (USD)				
OR 3b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX	
3c. MAILING ADDRESS 995 DALTON AVE	CITY CINCINNATI	STATE OH	POSTAL CODE 45203-1101	COUNTRY USA

4. COLLATERAL: This financing statement covers the following collateral:

The Collateral includes the Debtor's items of equipment, inventory, furniture and/or fixtures that are described below or in the attached Addendum, all general intangibles, software and goods relating to, arising from or embedded in any of the foregoing, all supporting obligations of all of the foregoing, and all cash and non-cash proceeds and products (including without limitation insurance proceeds) of all of the foregoing, and all additions and accessions thereto, substitutions therefor and replacements thereof, in each case whether now existing or hereafter acquired or arising and wherever located: 118 North Main Street, Trumbauersville, PA

SerialNumber Description Quantity UsageCondition ModelYear AssetLocation 86761

5. Check only if applicable and check only one box. Collateral is <input type="checkbox"/> held in a Trust (see UCC1Ad, item 17 and Instructions) <input type="checkbox"/> being administered by a Decedent's Personal Representative	
6a. Check only if applicable and check only one box: <input type="checkbox"/> Public-Finance Transaction <input type="checkbox"/> Manufactured-Home Transaction <input type="checkbox"/> A Debtor is a Transmitting Utility	6b. Check only if applicable and check only one box: <input type="checkbox"/> Agricultural Lien <input type="checkbox"/> Non-UCC Filing
7. ALTERNATIVE DESIGNATION (if applicable): <input type="checkbox"/> Lessee/Lessor <input type="checkbox"/> Consignee/Consignor <input type="checkbox"/> Seller/Buyer <input type="checkbox"/> Bailee/Bailor <input type="checkbox"/> Licensee/Licensor	

8. OPTIONAL FILER REFERENCE DATA:

98985339-1 - 7694952 [162836911]

International Association of Commercial Administrators(IACA)

FOLLOW INSTRUCTIONS

9. NAME OF FIRST DEBTOR: Same as line 1a or 1b on Financing Statement; if line 1b was left blank because Individual Debtor name did not fit, check here	
<b>OR</b>	9a. ORGANIZATION'S NAME
	9b. INDIVIDUAL'S SURNAME
	FIRST PERSONAL NAME
ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX

**THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY**

**ADDITIONAL DEBTOR'S NAME:** Provide only one Debtor name (a or b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name)

<b>OR</b>	a. ORGANIZATION'S NAME				
	b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX	
c. MAILING ADDRESS		CITY	STATE	POSTAL CODE	COUNTRY

**ADDITIONAL SECURED PARTY'S NAME or ASSIGNOR SECURED PARTY'S NAME:** Provide only one name (a or b)

<b>OR</b>	a. ORGANIZATION'S NAME				
	b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX	
c. MAILING ADDRESS		CITY	STATE	POSTAL CODE	COUNTRY

3	HAMRICK MODEL CHALLENGER CASE PACKER	1	Used	118 N Main St, TRUMBAUERSVILLE, BUCKS, PA, USA, 18970
L177V03620G	2009 HOYSTER FORK TRUCK	1	Used	118 N Main St, TRUMBAUERSVILLE, BUCKS, PA, USA, 18970
[No Serial Number]	36" TURNTABLE BOTTLING LINE PARTS	1	Used	118 N Main St, TRUMBAUERSVILLE, BUCKS, PA, USA, 18970
[No Serial Number]	INLINE OVERFLOW FILLER	1	Used	118 N Main St, TRUMBAUERSVILLE, BUCKS, PA, USA, 18970
[No Serial Number]	GRIPPER RINSER	1	Used	118 N Main St, TRUMBAUERSVILLE, BUCKS, PA, USA, 18970
[No Serial Number]	SASIB ROTARY LABELER	1	Used	118 N Main St, TRUMBAUERSVILLE, BUCKS, PA, USA, 18970
[No Serial Number]	AVERY WRAP LABLER	1	Used	118 N Main St, TRUMBAUERSVILLE, BUCKS, PA, USA, 18970
[No Serial Number]	6400 GALLON STORAGE TANK	1	Used	118 N Main St, TRUMBAUERSVILLE, BUCKS, PA, USA, 18970
[No Serial Number]	LABORATORY DENSITY METER	1	Used	118 N Main St, TRUMBAUERSVILLE, BUCKS, PA, USA, 18970
[No Serial Number]	ULTRA FLOW VALVE ACTUATOR W/ ACCESSORIES	1	Used	118 N Main St, TRUMBAUERSVILLE, BUCKS, PA, USA, 18970
361	SIMONAZZI FILLER/CAPPER W/ ACCESSORIES	1	Used	118 N Main St, TRUMBAUERSVILLE, BUCKS, PA, USA, 18970
9812117	HAMRICK MODEL CHALLENGER CASE PACKER	1	Used	118 N Main St, TRUMBAUERSVILLE, BUCKS, PA, USA, 18970
57000389893	CLARK ELECTRIC PALLET JACK	1	Used	118 N Main St, TRUMBAUERSVILLE, BUCKS, PA, USA, 18970
HD0411	24V CHARGER	1	Used	118 N Main St, TRUMBAUERSVILLE, BUCKS, PA, USA, 18970
T8657	INDUSTRIAL BATTERY FOR PALLET JACK	1	Used	118 N Main St, TRUMBAUERSVILLE, BUCKS, PA, USA, 18970
[No Serial Number]	FILTER/ NORYL PLATES	1	Used	118 N Main St, TRUMBAUERSVILLE, BUCKS, PA, USA, 18970
1702020010	AIR COMPRESSOR	1	Used	118 N Main St, TRUMBAUERSVILLE, BUCKS, PA, USA, 18970
53292	THERMA EXCHANGE CYCLING REFRIGERATED DRYER	1	Used	118 N Main St, TRUMBAUERSVILLE, BUCKS, PA, USA, 18970
K9138662	ARO DIAPHRAGM PUMP	1	Used	118 N Main St, TRUMBAUERSVILLE, BUCKS, PA, USA, 18970
[No Serial Number]	FORK TRUCK	1	Used	118 N Main St, TRUMBAUERSVILLE, BUCKS, PA, USA, 18970
[No Serial Number]	MILLING MACHINE	1	Used	118 N Main St, TRUMBAUERSVILLE, BUCKS, PA, USA, 18970
[No Serial Number]	WINE PLATE FILTER	1	Used	118 N Main St, TRUMBAUERSVILLE, BUCKS, PA, USA, 18970
96927	V.Q.C. BOTTLE UNCASER	1	Used	118 N Main St, TRUMBAUERSVILLE, BUCKS, PA, USA, 18970
[No Serial Number]	TANKS	5	Used	118 N Main St, TRUMBAUERSVILLE, BUCKS, PA, USA, 18970
[No Serial Number]	304 STAINLESS STEEL SHEET 8X8 3/8" THICK	1	Used	118 N Main St, TRUMBAUERSVILLE, BUCKS, PA, USA, 18970
11025014PLUD	VIDEOJET MODEL P3400 LABEL PRINTING APPLICATOR	1	Used	118 N Main St, TRUMBAUERSVILLE, BUCKS, PA, USA, 18970
E-80724	AXON EZ-SEAL SLEEVER WITH HEAT TUNNEL	1	Used	118 N Main St, TRUMBAUERSVILLE, BUCKS, PA, USA, 18970
[No Serial Number]	CONTAINER HANDLING PARTS	1	Used	118 N Main St, TRUMBAUERSVILLE, BUCKS, PA, USA, 18970
[No Serial Number]	MORRISON SINGLE SLAVE DRIVEN METERING CUSTOM DRIVE ASSEMBLY W/ ACCESSORIES	1	Used	118 N Main St, TRUMBAUERSVILLE, BUCKS, PA, USA, 18970
[No Serial Number]	ALCOA MODEL 212-8 ROPP CAPPER	2	Used	118 N Main St, TRUMBAUERSVILLE, BUCKS, PA, USA, 18970
[No Serial Number]	75 TON AIR COOLER	1	Used	118 N Main St, TRUMBAUERSVILLE, BUCKS, PA, USA, 18970

13. ☐ This FINANCING STATEMENT is to be filed [for record] (or recorded) in the REAL ESTATE RECORDS (if applicable)

14. This FINANCING STATEMENT:  
☐ covers timber to be cut ☐ covers as-extracted collateral ☐ is filed as a fixture filing

15. Name and address of a RECORD OWNER of real estate described in item 16 (if Debtor does not have a record interest):

16. Description of real estate:

17. MISCELLANEOUS:

**UCC FINANCING STATEMENT**

## FOLLOW INSTRUCTIONS

<b>A. NAME &amp; PHONE OF CONTACT AT FILER(Optional)</b> Corporation Service Company-(800) 858-5294	
<b>B. E-MAIL CONTACT AT FILER(optional)</b> filingdept@cscinfo.com	
<b>C. SEND ACKNOWLEDGMENT TO: (Name and Address)</b> <div style="border: 1px solid black; padding: 10px; margin: 10px 0;">           Corporation Service Company            COUNTER            Springfield            IL 62703            United States         </div>	
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1. DEBTOR'S NAME: Provide the exact, full Debtor name. Do not omit, modify or abbreviate any part of Debtor's name.

1a. ORGANIZATION'S NAME Midnight Madness Distilling LLC				
OR 1b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX	
1c. MAILING ADDRESS 118 North Main Street	CITY Trumbauersville	STATE PA	POSTAL CODE 18970	COUNTRY USA

2. DEBTOR'S NAME: Provide the exact, full Debtor name. Do not omit, modify, or abbreviate any part of the Debtor's name.

2a. ORGANIZATION'S NAME				
OR 2b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX	
2c. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY

3. SECURED PARTY'S NAME (or NAME of ASSIGNEE of ASSIGNOR SECURED PARTY): Provide only one Secured Party name (3a or 3b)

3a. ORGANIZATION'S NAME PNC Equipment Finance, LLC				
OR 3b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX	
3c. MAILING ADDRESS 995 Dalton Avenue	CITY Cincinnati	STATE OH	POSTAL CODE 45203	COUNTRY USA

4. COLLATERAL: This financing statement covers the following collateral:

The Collateral includes all assets of the Debtor, of every kind and nature, now existing and hereafter acquired and arising and wherever located, including without limitation, accounts (including healthcare-insurance receivables and credit card receivables), deposit accounts, commercial tort claims, letter of credit rights, chattel paper (including electronic chattel paper), documents, instruments, investment property, general intangibles (including payment intangibles), software, goods, inventory, equipment, furniture and fixtures, all supporting obligations of the foregoing, and all cash and noncash proceeds and products (including without limitation insurance proceeds) of the foregoing, and all additions and accessions thereto, substitutions therefor and replacements thereof.

5. Check only if applicable and check only one box: Collateral is <input type="checkbox"/> held in a Trust (see UCC1Ad, item 17 and Instructions) <input type="checkbox"/> being administered by a Decedent's Personal Representative	
6a. Check only if applicable and check only one box: <input type="checkbox"/> Public-Finance Transaction <input type="checkbox"/> Manufactured-Home Transaction <input type="checkbox"/> A Debtor is a Transmitting Utility	6b. Check only if applicable and check only one box: <input type="checkbox"/> Agricultural Lien <input type="checkbox"/> Non-UCC Filing
7. ALTERNATIVE DESIGNATION (if applicable): <input type="checkbox"/> Lessee/Lessor <input type="checkbox"/> Consignee/Consignor <input type="checkbox"/> Seller/Buyer <input type="checkbox"/> Bailee/Bailor <input type="checkbox"/> Licensee/Licensor	

8. OPTIONAL FILER REFERENCE DATA:

98985339-2 - 7697951 [164224170]

International Association of Commercial Administrators(IACA)

**UCC FINANCING STATEMENT AMENDMENT**

FOLLOW INSTRUCTIONS

A. NAME & PHONE OF CONTACT AT FILER (optional) CSC 1-800-858-5294	
B. E-MAIL CONTACT AT FILER (optional) Cscpa@cscglobal.com	
C. SEND ACKNOWLEDGMENT TO: (Name and Address)  1804 12856 CSC Acct# 30067  Filed In: Pennsylvania (S.O.S.)	



TCO200416DP0477

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

1a. INITIAL FINANCING STATEMENT FILE NUMBER  
2019052000631 05/20/20191b. ☐ This FINANCING STATEMENT AMENDMENT is to be filed [for record]  
(or recorded) in the REAL ESTATE RECORDS  
Filer: attach Amendment Addendum (Form UCC3Ad) and provide Debtor's name in item 132. ☐ TERMINATION: Effectiveness of the Financing Statement identified above is terminated with respect to the security interest(s) of Secured Party authorizing this Termination Statement3. ☐ ASSIGNMENT (full or partial): Provide name of Assignee in item 7a or 7b, and address of Assignee in item 7c and name of Assignor in item 9  
For partial assignment, complete items 7 and 9 and also indicate affected collateral in item 84. ☐ CONTINUATION: Effectiveness of the Financing Statement identified above with respect to the security interest(s) of Secured Party authorizing this Continuation Statement is continued for the additional period provided by applicable law5. ☐ PARTY INFORMATION CHANGE:

Check one of these two boxes:

AND Check one of these three boxes to:

This Change affects ☐ Debtor or ☐ Secured Party of record☐ CHANGE name and/or address: Complete item 6a or 6b; and item 7a or 7b and item 7c☐ ADD name: Complete item 7a or 7b, and item 7c☐ DELETE name: Give record name to be deleted in item 6a or 6b

6. CURRENT RECORD INFORMATION: Complete for Party Information Change - provide only one name (6a or 6b)

6a. ORGANIZATION'S NAME Midnight Madness Distilling, LLC

OR	6b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
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7. CHANGED OR ADDED INFORMATION: Complete for Assignment or Party Information Change - provide only one name (7a or 7b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name)

7a. ORGANIZATION'S NAME

OR	7b. INDIVIDUAL'S SURNAME
	INDIVIDUAL'S FIRST PERSONAL NAME
	INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)
	SUFFIX

7c. MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTRY
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8. ☒ COLLATERAL CHANGE: Also check one of these four boxes: ☒ ADD collateral ☐ DELETE collateral ☐ RESTATE covered collateral ☐ ASSIGN collateral

Indicate collateral:

See attached Exhibit C

9. NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS AMENDMENT: Provide only one name (9a or 9b) (name of Assignor, if this is an Assignment)  
If this is an Amendment authorized by a DEBTOR, check here ☐ and provide name of authorizing Debtor

9a. ORGANIZATION'S NAME PNC Equipment Finance, LLC

OR	9b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
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10. OPTIONAL FILER REFERENCE DATA: 98985339-3 - 7692555 Debtor: Midnight Madness Distilling, LLC

1804 12856





Exhibit C

Loan Number: 98985339-3

Description of Equipment/Fixtures/Inventory/Motor Vehicles (including Location):

Quantity	Description	VIN/ Serial #	Location Address	City/State
1	Parts, Accessories, Hoses, Pipes, Pumps, Lines, Service, Screws, Etc.		118 North Main St	Trumbauersville, PA
1	Tank SS550 42x48 FM FN SE FUS		118 North Main St	Trumbauersville, PA
2	Tank SS793 54X54 FN SE FUS STD		118 North Main St	Trumbauersville, PA
1	2009 Hyster H60FT Gas Forklift	L177V03620G	118 North Main St	Trumbauersville, PA
1	TPX201-2 System		118 North Main St	Trumbauersville, PA
1	Custom Designed leak test chamber		118 North Main St	Trumbauersville, PA
1	Velcorin DT 3 Touch		118 North Main St	Trumbauersville, PA
1	2014 Clark Electric Pallet Jack PWX30	57000389893	118 North Main St	Trumbauersville, PA
1	Laboratory Density Meter DMA 4500 M		118 North Main St	Trumbauersville, PA
2	Fiberglass Convertible Hand/Platform Truck		118 North Main St	Trumbauersville, PA
1	Pump and Float Elevator		118 North Main St	Trumbauersville, PA
1	2014 Trane 155 Ton Air Cooled Chiller		118 North Main St	Trumbauersville, PA
1	PSP 2700-GPD Pumped Commercials RO System w/ Deluxe LCD Controller		118 North Main St	Trumbauersville, PA
1	Two Stage Laco W2V10 High Vacuum Pump		118 North Main St	Trumbauersville, PA
1	.49 lb counting scale		118 North Main St	Trumbauersville, PA
1	Handheld Plug in Ultraviolet Lamp		118 North Main St	Trumbauersville, PA
1	UV 365mm LED Light Curing Spot Gun		118 North Main St	Trumbauersville, PA
1	Pump and Float Elevator		118 North Main St	Trumbauersville, PA
1	Rotator Connecting Ring w/ 4 poles		118 North Main St	Trumbauersville, PA
1	.49 lb counting scale		118 North Main St	Trumbauersville, PA
2	Metro Carts		118 North Main St	Trumbauersville, PA
1	3 Drawer Fireproof Cabinet		118 North Main St	Trumbauersville, PA
2	Large Office Desk		118 North Main St	Trumbauersville, PA
4	Metro Carts		118 North Main St	Trumbauersville, PA
1	Sullivan Palatek 10m Air Compressor		118 North Main St	Trumbauersville, PA
1	New Wesco 210365 Hand Truck		118 North Main St	Trumbauersville, PA
1	Composite Top Work Bench w/ manual wheel mower		118 North Main St	Trumbauersville, PA
1	6.2 HP Hydraulic Motor		118 North Main St	Trumbauersville, PA
1	6.7 HP Hydraulic Motor		118 North Main St	Trumbauersville, PA
1	9.6 HP Hydraulic Motor		118 North Main St	Trumbauersville, PA
1	2017 Ram Promoaster	3C6TRVB68HE534576	118 North Main St	Trumbauersville, PA
1	Hyster W50Z Pallet Jack	D215N02763L	118 North Main St	Trumbauersville, PA
1	Ko-00032 WG5 Evolution Series Machine Converter Kit		118 North Main St	Trumbauersville, PA
1	Nitrogen Doser		118 North Main St	Trumbauersville, PA
1	Glass Color Processor		118 North Main St	Trumbauersville, PA
1	Beverage Carbonator		118 North Main St	Trumbauersville, PA